

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. CONTRACT ID CODE		PAGE OF PAGES	
				1		2	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.		5. PROJECT NO. (If applicable)	
001		07/06/2015		PR-R3-15-00371			
6. ISSUED BY		CODE		7. ADMINISTERED BY (If other than Item 6)		CODE	
Region III		R3					
US Environmental Protection Agency							
Contracts Branch (3PM10)							
1650 Arch Street							
Philadelphia PA 19103-2029							
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)				(x) 9A. AMENDMENT OF SOLICITATION NO.			
Cherokee Nation Assurance, L.L.C.							
Attn: James Brown				9B. DATED (SEE ITEM 11)			
777 W CHEROKEE ST							
9183846935							
CATOOSA OK 740153235				x 10A. MODIFICATION OF CONTRACT/ORDER NO.			
				EP-S3-14-01			
				0004			
				10B. DATED (SEE ITEM 13)			
CODE 966247327		FACILITY CODE		09/30/2014			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS							
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended, <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.							
12. ACCOUNTING AND APPROPRIATION DATA (If required)				Net Increase:		\$100,000.00	
See Schedule							
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.							
CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.						
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).						
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:						
X	D. OTHER (Specify type of modification and authority) B.4 Min and Max						
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.							
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)							
DUNS Number: 966247327							
Community Involvement							
TOCOR: JTRALIE Max Expire Date: 09/29/2019							
The purpose of this modification is to increase funding on Task Order 4 with the below-noted lines of accounting:							
Task Order Ceiling Amount is hereby increased from: \$100,000.00 to \$200,000.00.							
Except as expressly specified herein, all other terms and conditions remain unchanged and in full force and effect.							
Continued ...							
Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.							
15A. NAME AND TITLE OF SIGNER (Type or print)				16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)			
				Denise T. Page			
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA		16C. DATE SIGNED	
(Signature of person authorized to sign)				 (Signature of Contracting Officer)		07/06/2015	

NAME OF OFFEROR OR CONTRACTOR
Cherokee Nation Assurance, L.L.C.

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The effective date of this modification is the date signed by the Contracting Officer.</p> <p>NEW ACCOUNTING CODE ADDED: Account code: 15-T-3AS0P-303DD2-2505-C001-153ASB1018-001 Beginning FiscalYear 15 Ending Fiscal Year Fund (Appropriation) T Budget Organization 3AS0P Program (PRC) 303DD2 Budget (BOC) 2505 Job # (Site/Project) 03WQCR00 Cost Organization C001 DCN-LineID 153ASB1018-001 Quantity: 0 Amount: \$100,000.00</p>				